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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 0229-0783P			
Application Number				Filed November 25, 2003		
For WOOD TYPE GOLF	CLUB HEAD					
Art Unit 3711			Examiner	S. L. Blau		
This is a request under the pidentified application.						
The requested extension an	id fee are as follows (che	eck time period desi	red and enter the a	ppropriate fee below):		
X One month (37	CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	<u>\$ 120.00</u>		
Two months (3	7 CFR 1.17(a)(2))	\$450	\$225	\$		
Three months ((37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four months (3	37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five months (3	7 CFR 1.17(a)(5))	\$2160	\$1080	\$		
Applicant claims sma	all entity status. See 37	CFR 1.27.				
X A check in the amou	int of the fee is enclosed.	i.				
Payment by credit ca	ard. Form PTO-2038 is a	attached.				
The Director has alre	eady been authorized to	charge fees in this :	application to a Der	posit Account.		
The Director is hereb Deposit Account Nur	by authorized to charge a mber 02-2448		be required, or creedosed a duplicate co			
I am the appli	icant/inventor.					
	gnee of record of the enti Statement under 37 CFR			6).		
attor	ney or agent of record.	Registration Numbe	r			
_	ney or agent under 37 C					
Re	gistration number if acting u	under 37 CFR 1.34	32,868	•		

Referrele R. Hand	le Ky. He.	September 30, 2005
Signature	32824	Date
Andrew D. Meikle		(703) 205-8000
Typed or printed name		Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of forms are submitted.

10/04/2005 HALI11 00000062 10720153

120.00 OP 01 FC:1251

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\(\tilde{u}\)	15, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known					control number.
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 200:	5 (H.R. 4818).			10/720,153-Cd	0/720,153-Conf. #4152	
ቾ FEE TRANSMITTA	A I			November 25,	er 25, 2003	
	First Named Inventor Masaru KOHNO		0			
FOF F 1 2005	For FY 2005 Examiner Name S. L. Blau					
Applicant claims small entity status. See 37 CFF	Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3711					
TOTAL AMOUNT OF PAYMENT (\$) 120	.00	Attorney Docket	t No.	0229-0783P		
METHOD OF PAYMENT (check all that apply)						
X Check Credit Card Money Orde	er Non	ne Other	(please ide	ntify):		
Deposit Account Deposit Account Number: 02-244	48 Deposit Acc	ount Name:	Birch, S	tewart, Kolasch	& Birch, L	LP.
For the above-identified deposit account, the		'		 		
Charge fee(s) indicated below	ie Director is		•	ndicated below, e		ho filing foo
		님 `	, ,	·	kcept ioi u	ie illing iee
Charge any additional fee(s) or under fee(s) under 37 CFR 1.16 and 1.17	rpayment of	x Credit	t any over	payments		
FEE CALCULATION			_			
1. BASIC FILING, SEARCH, AND EXAMINATION						
FILING FEES Small Ent	-	ARCH FEES Small Entity		INATION FEES Small Entity		
Application Type Fee (\$) Fee (\$)			Fee (\$		Fees F	Paid (\$)
Utility 300 150	500	250	200	100		
Design 200 100	100	50	130	65		
Plant 200 100	300	150	160	80		
Reissue 300 150	500	250	600	300		
Provisional 200 100	0	0	0	0		
2. EXCESS CLAIM FEES						Small Entity
Fee Description					<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (including Reissues)					50	25
Each independent claim over 3 (including Reissue	:s)				200	100
Multiple dependent claims					360	180
Total Claims Extra Claims Fee (\$)		Paid (\$)		Multiple Depende		
20 = x =			!	ee (\$)	Fee Paid (\$	57
Indep. Claims Extra Claims Fee (\$)	Fee P	Paid (\$)				
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 she						
listings under 37 CFR 1.52(e)), the application				entity) for each a	dditional 50	0
sheets or fraction thereof. See 35 U.S.C. 41(a				(P)	Ea-	Daid (f)
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Num</u>		dditional 50 or fra (round up to a wh				Paid (\$)
4. OTHER FEE(S)		tround up to a wh	ole numbel	/ ×	=	Paid (\$)
Non-English Specification. \$130 fee (no small	II entity disco	ount)			rees	raiu (\$)

SUBMITTED BY	Λ. Λ.						
Signature	M Muy	Ley	M252,234	Registration No. (Attorney/Agent)	32,868	Telephone	(703) 205-8000
Name (Print/Type) Andr	ew D. Meikle	,				Date	September 30, 2005

Other (e.g., late filing surcharge): 1251 Extension for response within first month

ADM/FRH/ljr

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